



AF/1644 \$

# TRANSMITTAL FORM

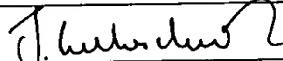
*(to be used for all correspondence after initial filing)*

Total Number of Pages in This Submission

Application Number	08/838,486
Filing Date	April 7, 1997
First Named Inventor	BAEKKESKOV et al.
Art Unit	1644
Examiner Name	Gerald R. Ewoldt
Total Number of Pages in This Submission	5
Attorney Docket Number	2307AA-031220US

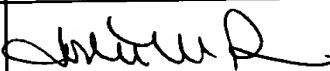
ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input checked="" type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  Return Postcard
	Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	Townsend and Townsend and Crew LLP Joe Liebeschuetz	
Signature		
Date	12/29/03	

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Jodie M. Rivas		
Signature		Date	12/29/03

**FEE TRANSMITTAL  
for FY 2004**

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$ 375)

*Complete if Known*

Application Number	08/838,486
Filing Date	April 7, 1997
First Named Inventor	BAEKKESKOV et al.
Examiner Name	Gerald R. Ewoldt
Art Unit	1644
Attorney Docket No.	2307AA-031220US

**METHOD OF PAYMENT (check all that apply)**

Check  Credit Card  Money Order  Other  None  
 Deposit Account:

Deposit Account Number 20-1430

Deposit Account Name Townsend and Townsend and Crew LLP

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 Charge any additional fee(s) or any underpayment of fee(s)  
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

**FEES CALCULATION**

**1. BASIC FILING FEE**

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1) (\$)

**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

Total Claims	Independent Claims	Multiple Dependent	Fee from below		Fee Paid
			Extra Claims	Fee (\$)	

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	86	2204	43	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

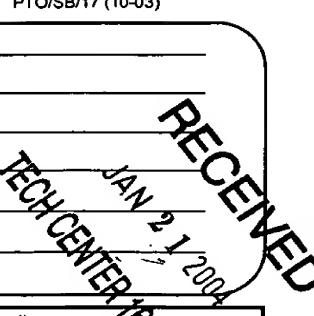
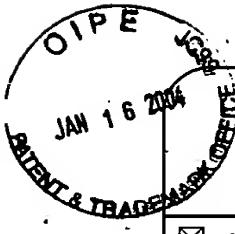
\*\* or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)					
3. ADDITIONAL FEES		Fee Description		Fee Paid	
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	420	2252	210	Extension for reply within second month	210
1253	950	2253	475	Extension for reply within third month	
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1,005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	165
1402	330	2402	165	Filing a brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,330	2453	665	Petition to revive - unintentional	
1501	1,330	2501	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Petitions related to provisional applications	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	
Other fee (specify)					
*Reduced by Basic Filing Fee Paid				SUBTOTAL (3)	(\$375)

**SUBMITTED BY**

Name (Print/Type)	Joe Liebeschuetz	Registration No. (Attorney/Agent)	37,505	Telephone	650-326-2400
Signature	J. Liebeschuetz			Date	12/29/03

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On 1/13/04

TOWNSEND and TOWNSEND and CREW LLP

By: Krusti Cipol

**PATENT**  
Docket No.: 2307AA-031220US  
Client Ref. No.: 90-160-5

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

Steinunn Baekkeskov et al.

Application No.: 08/838,486

Filed: April 7, 1997

For: IMPROVED METHODS FOR THE  
DIAGNOSIS AND TREATMENT OF  
DIABETES

Examiner: Gerald R. Ewoldt

Art Unit: 1644

**COMMUNICATION**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Attached is a submission we filed with the United States Patent and Trademark Office in a sufficiently address and postage paid envelope. The package was returned to us January 6, 2004 indicating the address was insufficient. We believe this to be a United States Postal Service error and therefore are resubmitting the documents with a copy of the envelope as returned. If the United States Patent and Trademark Office believes a further extension of time is due for submission of the documents, please deduct the extension of time fee from Deposit Account No.: 20-1430. A duplicate copy of this Communication is enclosed.

Steinunn Baekkeskov et al.  
Application No.: 08/838,486  
Page 2

PATENT

If the Examiner believes a telephone conference is necessary, please  
telephone the undersigned.

Respectfully submitted,



Joe Liebeschuetz  
Reg. No. 37,505

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Assistant Commissioner for Patents

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DEC 29 '03